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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Gregory First name A. Middle name Carlson Last name and Suffix (Sr., Jr., II, III)	-	Tammy First name L. Middle name Carlson Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			FKA Tammy L Stepanek
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4165		xxx-xx-0054

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Debtor 1 Gregory A. Carlson Tammy L. Carlson

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)		
		EINs	EINs		
5.	Where you live	907 Greenlee Avenue Winnebago, IL 61088	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Winnebago			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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	otor 1 otor 2	Gregory A. Carlso Tammy L. Carlson			Doddii	3	Case number (if known)	
Par	t 2:	Tell the Court About \	Your Bankı	uptcy Ca	ase			
7.	Bank	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy					
	choo	sing to file under	■ Chapt	er 7				
			☐ Chapt	er 11				
			☐ Chapt	er 12				
			☐ Chapt	er 13				
8.	How	you will pay the fee	abo ord a pi	ut how your er. If your e-printed	ou may pay. Typio attorney is subm address.	cally, if you are paying the fee you itting your payment on your beha	with the clerk's office in your local court for more detail urself, you may pay with cash, cashier's check, or mone of the figure of the detail of the country of the detail of the country of the details of the detail	y h
						(Official Form 103A).	n, sign and attach the Application for Individuals to Pay	
			but app	is not rec lies to yo	uired to, waive your family size and	our fee, and may do so only if you I you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judge may ir income is less than 150% of the official poverty line the installments). If you choose this option, you must fill ou al Form 103B) and file it with your petition.	nat
9.	Have you filed for		■ No.					
		bankruptcy within the last 8 years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		nny bankruptcy s pending or being	■ No					
	filed not fi you,	by a spouse who is iling this case with or by a business er, or by an	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your	■ No.	Go to	line 12.			
	16210	GIICE !	☐ Yes.	Has yo	our landlord obtain	ned an eviction judgment against	you and do you want to stay in your residence?	
					No. Go to line 12	2.		
					Yes. Fill out <i>Initi</i> bankruptcy petit		udgment Against You (Form 101A) and file it with this	

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Deb	otor 2 Tammy L. Carlsor	1			Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Owr	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code	
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and	□ res.	What is	the hazard?		
	identifiable hazard to public health or safety?					
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code	

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Debtor 1 Gregory A. Carlson
Tammy L. Carlson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-81393 Doc 1 Filed 06/09/17 Entered 06/09/17 15:52:03 Desc Main Document Page 6 of 54

	otor 1 Gregory A. Car otor 2 Tammy L. Carls		Docum			mber (if known)	
Par	t 6: Answer These Qu	estions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily individual primarily for a pe ☐ No. Go to line 16b.			defined in 11 U.S.C. § 10 ⁻⁷	1(8) as "incurred by an
			Yes. Go to line 17.				
		16b.	Are your debts primarily money for a business or in				otain
			☐ No. Go to line 16c.				
			Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consu	mer debts or bus	iness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded a		I am filing under Chapter 7 are paid that funds will be a				dministrative expenses
	administrative expenses are paid that funds will		No				
	be available for distribution to unsecur creditors?	ed	☐ Yes				
18.	How many Creditors do	■ 1-49		1 ,000-5,000)	2 5,001-50,00	00
	you estimate that you owe?	□ 50-99		☐ 5001-10,00		□ 50,001-100,0	
		☐ 100-1 ☐ 200-9		☐ 10,001-25,0	000	☐ More than10	0,000
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001		□ \$500,000,000	1 - \$1 billion
•	estimate your assets to be worth?	山 \$30,0	01 - \$100,000		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		001 - \$10 billion ,001 - \$50 billion
		. ,	001 - \$500,000 001 - \$1 million		01 - \$500 million		
20.	How much do you estimate your liabilities	\$0 - \$		\$1,000,001		\$500,000,00	
	to be?	山 \$50,0	001 - \$100,000 001 - \$500,000		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		001 - \$10 billion 0,001 - \$50 billion
			001 - \$300,000 001 - \$1 million		01 - \$500 million		
Par	t 7: Sign Below						
For	you	I have ex	amined this petition, and I d	leclare under penalty of	perjury that the in	nformation provided is true	and correct.
		If I have of United St	chosen to file under Chapter tates Code. I understand the	r 7, I am aware that I ma e relief available under e	y proceed, if eligi each chapter, and	ible, under Chapter 7, 11,	12, or 13 of title 11, er Chapter 7.
			rney represents me and I did at, I have obtained and read				ne fill out this
I request relief in accordance with the chapter of title 11, United States C					ted States Code,	specified in this petition.	
I understand making a false bankruptcy case can result and 3571.							
			ory A. Carlson A. Carlson		/s/ Tammy L. Tammy L. Ca		
			e of Debtor 1		Signature of De		
		Executed	on June 9, 2017		Executed on	June 9, 2017	
			MM / DD / YYYY		_	MM / DD / YYYY	

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	Gregory A. Carlson	Document	rage 7 01 54
Debtor 2	Tammy L. Carlson		Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel /	A. Springer	Date	June 9, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Printed name			
Springer L	.aw Firm		
Firm name			
2222 E Sta	ite St		
Suite 107			
Rockford,	IL 61104		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Bar number & St	tate		

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	Docum	TIL FAUE O UI 34	
mation to identify your	case:		
Gregory A. Carls	on		
First Name	Middle Name	Last Name	
Tammy L. Carlso	n		
First Name	Middle Name	Last Name	
nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Gregory A. Carlso First Name	Gregory A. Carlson First Name Middle Name Tammy L. Carlson First Name Middle Name	Gregory A. Carlson First Name Middle Name Last Name Tammy L. Carlson First Name Middle Name Last Name

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
		value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	192,020.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	25,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	217,420.0
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	226,755.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	29,191.3
	Your total liabilities	\$	255,946.35
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,279.84
		~	
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,767.33
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
3.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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	Gregory A. Carlson		9	
Debtor 2	Tammy L. Carlson		Case number (if known)	

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,917.57

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this inf Debtor 1	Gregory A. Ca	rlson	<u> </u>				
Debtor 2 Spouse, if filing)	First Name Tammy L. Car First Name	Ison	dle Name	Last Name Last Name			
United States Case number	Bankruptcy Court for th	e: NORTHE	RN DISTRICT OF ILL	INOIS			Check if this is an amended filing
Schedu n each categor nink it fits best formation. If n nswer every q	. Be as complete and acc nore space is needed, att uestion.	cribe items. Lis curate as possil ach a separate	ble. If two married peop sheet to this form. On tl	an asset fits in more than one le are filing together, both are he top of any additional pages, wn or Have an Interest In	equally responsi	ible for suppl	lying correct
No. Go to ■ Yes. Whe	,	able interest in		g, land, or similar property?			
907 Greenlee Avenue Street address, if available, or other description		What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative		the amount of a	Oo not deduct secured claims or exemptions. P ne amount of any secured claims on Schedule Creditors Who Have Claims Secured by Proper		
Winneb City	pago IL (61088-0000 ZIP Code	Land Investment p Timeshare Other	st in the property? Check one		/? p 020.00 ature of your imple, tenance	Current value of the cortion you own? \$192,020.00 Townership interest by by the entireties, or
Winneb County	ago		Debtor 2 only Debtor 1 and At least one of	/ Debtor 2 only of the debtors and another you wish to add about this item	□ Check if the construct		inity property

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$192,020.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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الماد	or 2 Tammy L. Carlson	C		
Cai	rs, vans, trucks, tractors, sport utility	vehicles, motorcycles		
	Yes			
3.1	Make: GMC Model: Sierra	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Year: 2007 Approximate mileage: 110,000	■ Debtor 2 only □ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
1	Other information:	☐ At least one of the debtors and another ☐ Check if this is community property	\$7,325.00	\$7,325.0
		(see instructions)		
3.2	Make: Buick Model: Enclave	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clair	d claims on Schedule D:
	Year: 2008 Approximate mileage: 150,000 Other information:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Check if this is community property (see instructions)	\$6,825.00	\$6,825.00
3.3	Make: Jaguar Model: X-Type	Who has an interest in the property? Check one □ Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Year: 2004 Approximate mileage: 107,000 Other information:	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Cire indinator.	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$3,200.00	\$3,200.00
3.4	Make: Mazda Model: Mazda5	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Year: 2008 Approximate mileage: 108,000 Other information:	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information.	☐ At least one of the debtors and another ☐ Check if this is community property	\$2,975.00	\$2,975.00

claims or exemptions.

De	btor 1	Gregory A. (Document	Page 12 of 54	
	btor 2	Tammy L. C		Case number	r (if known)
		old goods and f es: Major appliar	urnishings ices, furniture, linens, china, kitchenware		
	Yes.	Describe			
			Household Furniture		\$1,200.00
			<u>·</u>		
	□ No	es: Televisions a	nd radios; audio, video, stereo, and digital ed phones, cameras, media players, games	quipment; computers, printers, scanne	ers; music collections; electronic devices
			TV, Computer		\$500.00
	Example □ No		figurines; paintings, prints, or other artwork; ons, memorabilia, collectibles	books, pictures, or other art objects; s	tamp, coin, or baseball card collections;
			Books, Pictures, artwork, CD Collect	ction	\$100.00
	Example No	ent for sports a es: Sports, photo musical instr Describe	graphic, exercise, and other hobby equipments	nt; bicycles, pool tables, golf clubs, sk	
			Sport Equipment		\$200.00
11.	■ No □ Yes. Clothes Example ■ No	les: Pistols, rifle: Describe	s, shotguns, ammunition, and related equipm othes, furs, leather coats, designer wear, sho		
	□ No		welry, costume jewelry, engagement rings, w	redding rings, heirloom jewelry, watch	es, gems, gold, silver
			Wedding Ring		\$500.00
	Example ■ No	m animals les: Dogs, cats,	birds, horses		
	■ No	ner personal an Give specific inf	d household items you did not already lis ormation	t, including any health aids you did	not list

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Official Form 106A/B Schedule A/B: Property page 3

Entered 06/09/17 15:52:03 Case 17-81393 Doc 1 Filed 06/09/17 Desc Main Document Page 13 of 54 Debtor 1 Gregory A. Carlson Tammy L. Carlson Debtor 2 Case number (if known) 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes..... Cash \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Chase Bank \$1,000.00 Checking Members Alliance Credit Union \$200.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ Yes. List each account separately.

Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Institution name or individual: ☐ Yes.

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Case 17-81393 Filed 06/09/17 Entered 06/09/17 15:52:03 Page 14 of 54 Document Debtor 1 Gregory A. Carlson Tammy L. Carlson Debtor 2 Case number (if known) Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: \$355.00 Life Insurance **Gregory Carlson** \$0.00 **Term Life Tammy Carlson** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..

Doc 1

Official Form 106A/B Schedule A/B: Property page 5

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	Case 17-8	31393	Doc 1	Filed 06/09/17 Document	Entered 06/09/17 15:5 Page 15 of 54	2:03	Desc Main
Debtor 1 Debtor 2	Gregory A. C Tammy L. Ca				Case number	(if known)	
Examp ■ No		mploymen		you have filed a lawsu surance claims, or rights	it or made a demand for payment s to sue		
■ No	contingent and u		ed claims of	every nature, includin	g counterclaims of the debtor and	rights to s	set off claims
■ No	nancial assets yo		already list			_	
					ny entries for pages you have atta	ched	\$1,575.00
Part 5: De	scribe Any Busines	ss-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.		
	own or have any le to Part 6.	gal or equi	table interest	in any business-related p	roperty?		
Yes. 0	Go to line 38.						
							Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	nts receivable or Describe	commiss	sions you alr	ready earned			
<i>Exam</i> µ □ No	equipment, furni oles: Business-rela Describe			re, modems, printers, co	opiers, fax machines, rugs, telephone	es, desks, c	hairs, electronic devices
		Printer,	Computer				\$500.00
□ No	nery, fixtures, equ	uipment, :	supplies you	ı use in business, and	tools of your trade		
		Tool Se	t				\$500.00
41. Invento ■ No □ Yes.	ory Describe						
42. Interes ■ No	sts in partnership	s or joint	ventures				
☐ Yes.	Give specific info		bout them e of entity:		% of ownersh	nip:	

Official Form 106A/B Schedule A/B: Property page 6

Case 17-81393 Doc 1 Filed 06/09/17 Entered 06/09/17 15:52:03 Desc Main Document Page 16 of 54 Debtor 1 Gregory A. Carlson Tammy L. Carlson Debtor 2 Case number (if known) 43. Customer lists, mailing lists, or other compilations Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ■ No ☐ Yes. Describe..... 44. Any business-related property you did not already list ■ No ☐ Yes. Give specific information....... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$1,000.00 for Part 5. Write that number here...... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate. line 2 \$192,020.00 56. Part 2: Total vehicles, line 5 \$20,325.00 57. Part 3: Total personal and household items, line 15 \$2,500.00 Part 4: Total financial assets, line 36 \$1,575.00 59. Part 5: Total business-related property, line 45 \$1,000.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$25,400.00 Copy personal property total \$25,400.00

Official Form 106A/B Schedule A/B: Property page 7

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$217,420,00

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		DUCUITIE	IIL FAUC II UI 34	
Fill in this infor	mation to identify your	case:		
Debtor 1	Gregory A. Carls	on		
	First Name	Middle Name	Last Name	
Debtor 2	Tammy L. Carlso	n		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
(II KIIOWII)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
907 Greenlee Avenue Winnebago, IL 61088 Winnebago County	\$192,020.00		\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2007 GMC Sierra 110,000 miles	\$7,325.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line IIIII Schedule A.D. 3.1			100% of fair market value, up to any applicable statutory limit	
2007 GMC Sierra 110,000 miles	\$7,325.00		\$3,905.00	735 ILCS 5/12-1001(b)
Ellie Holli Gonedale A/D. G.1			100% of fair market value, up to any applicable statutory limit	
2008 Mazda Mazda5 108,000 miles Line from Schedule A/B: 3.4	\$2,975.00		\$2,400.00	735 ILCS 5/12-1001(c)
Ellie Holli Gonedale 7/D. G.4			100% of fair market value, up to any applicable statutory limit	
2008 Mazda Mazda5 108,000 miles	\$2,975.00		\$575.00	735 ILCS 5/12-1001(b)
Line nom <i>Schedule A/D</i> . 3.4			100% of fair market value, up to any applicable statutory limit	

Case 17-81393 Doc 1 Filed 06/09/17 Entered 06/09/17 15:52:03 Desc Main Page 18 of 54 Document Gregory A. Carlson Debtor 1 Debtor 2 Tammy L. Carlson Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Household Furniture** 735 ILCS 5/12-1001(b) \$1,200.00 \$1,200.00 Line from Schedule A/B: 6.1 100% of fair market value, up to any applicable statutory limit TV, Computer 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit Books, Pictures, artwork, CD 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Collection Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit **Sport Equipment** 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit Wedding Ring 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$20.00 \$20.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: Chase Bank 735 ILCS 5/12-1001(b) \$1,000.00 \$1,000.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Life Insurance 215 ILCS 5/238 \$355.00 100% **Beneficiary: Gregory Carlson** Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit Printer, Computer 735 ILCS 5/12-1001(d) \$500.00 \$500.00 Line from Schedule A/B: 39.1 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(d) Tool Set \$500.00 \$500.00 Line from Schedule A/B: 40.1 100% of fair market value, up to any applicable statutory limit

3.	Are you claiming	a homestead	exemption of	more th	han \$160,375?
----	------------------	-------------	--------------	---------	----------------

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

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Filli	in this information to identify yo	our case:	C 13 01 34		
Deb	otor 1 Gregory A. Ca			_	
	First Name	Middle Name Last Na	ame		
	otor 2 Tammy L. Car use if, filing) First Name	ISON Middle Name Last Na	ame .	_	
(Spot	use II, IIIIIg)	Midule Name Last Na	ane		
Unit	ed States Bankruptcy Court for th	e: NORTHERN DISTRICT OF ILLINOIS		_	
Case (if kno	e number _{pwn)}				if this is an ded filing
Off:	icial Form 106D				
Sc	hedule D: Creditor	s Who Have Claims Secu	ured by Propert	:y	12/15
is nee		e. If two married people are filing together, both it out, number the entries, and attach it to this fo			
1. Do	any creditors have claims secured	by your property?			
l	\square No. Check this box and submit	this form to the court with your other schedu	les. You have nothing else	to report on this form.	
ı	■ Yes. Fill in all of the information	n below.			
Part	List All Secured Claims				
2. List	st all secured claims. If a creditor has ach claim. If more than one creditor h	s more than one secured claim, list the creditor sep as a particular claim, list the other creditors in Part stical order according to the creditor's name.		Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Members Alliance Credit Union	Describe the property that secures the clain	n: \$3,100.00	\$3,200.00	\$0.00
	Creditor's Name	2004 Jaguar X-Type 107,000 miles			
		2004 cagaal X Type 107,000 Illinos			
	2550 South Alpine Road Rockford, IL 61108	As of the date you file, the claim is: Check all apply. Contingent	that		
	Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
	o owes the debt? Check one.	Nature of lien. Check all that apply.			
_	Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage car loan)	e or secured		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
	At least one of the debtors and another	• •	,		
_	Check if this claim relates to a	☐ Other (including a right to offset)			
(community debt				
Date	e debt was incurred 2/2015	Last 4 digits of account number			
	7				
2.2	Members Alliance Credit	Describe the annual to the teachers the electron	s6,262.00	\$6,825.00	\$0.00
	Union Creditor's Name	Describe the property that secures the claim		Ψ0,023.00	Ψ0.00
	oroditor o marito	2008 Buick Enclave 150,000 miles			
		A set the later of the decision in the set of the set o			
	2550 South Alpine Road	As of the date you file, the claim is: Check all apply.	that		
	Rockford, IL 61108	☐ Contingent			
	Number, Street, City, State & Zip Code	Unliquidated			
\A/!-	a sweethe debto of	Disputed			
_	o owes the debt? Check one.	Nature of lien. Check all that apply.			
_	Debtor 1 only	An agreement you made (such as mortgage	e or secured		
	Debtor 2 only	car loan)			
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
	At least one of the debtors and another	9			
υС	Check if this claim relates to a	☐ Other (including a right to offset)			

community debt

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Debtor 1	Gregory A	. Carlson		Case number (if know)		
	First Name	Middle Na	ame Last Name			
Debtor 2	Tammy L.	Carlson				
	First Name	Middle Na	ame Last Name			
Date debt	was incurred	5/2016	Last 4 digits of account number			
2.3 Na 1	tionstar Moi	tgage LLC	Describe the property that secures the claim:	\$217,393.00	\$192,020.00	\$25,373.00
Cred	litor's Name		907 Greenlee Avenue Winnebago, IL 61088 Winnebago County			
Blv	50 Cypress ' /d. ppell, TX 75		As of the date you file, the claim is: Check all that apply.			
Num	ber, Street, City, S	ate & Zip Code	☐ Unliquidated			
Who owe	es the debt? C	neck one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor □ Debtor	,		■ An agreement you made (such as mortgage or so car loan)	ecured		
_	1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At leas	t one of the deb	ors and another	☐ Judgment lien from a lawsuit			
	if this claim re nunity debt	lates to a	Other (including a right to offset)			
Date debt	was incurred	3/26/2014	Last 4 digits of account number			
Add the	dollar value of	your entries in Co	olumn A on this page. Write that number here:	\$226,755.	00	
	the last page o	•	the dollar value totals from all pages.	\$226,755.	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill in this i	nformation to identify your ca	se:		
Debtor 1	Gregory A. Carlson	1		
	First Name	Middle Name	Last Name	
Debtor 2	Tammy L. Carlson			
(Spouse if, filing) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	
Case number	er			
(if known)				☐ Check if this is an
				amended filing
Official F	orm 106E/F			
	e E/F: Creditors Wh	o Have Unsecured	Claims	12/15
			TY claims and Part 2 for creditors with NON	
Schedule D: 0 left. Attach the name and cas	Creditors Who Have Claims Secur e Continuation Page to this page. e number (if known).	ed by Property. If more space is If you have no information to re	Do not include any creditors with partially s needed, copy the Part you need, fill it out, i eport in a Part, do not file that Part. On the to	number the entries in the boxes on the
	ist All of Your PRIORITY Unse			
_ `	reditors have priority unsecured	riaims against you?		
	o to Part 2.			
Yes.	:-+ All -+ V NONDDIODITY	Una a a coma di Claima a		
	ist All of Your NONPRIORITY			
3. Do any c	reditors have nonpriority unsecu	red claims against you?		
☐ No. Y	ou have nothing to report in this part	. Submit this form to the court with	your other schedules.	
Yes.				
unsecure	d claim, list the creditor separately for	or each claim. For each claim liste	he creditor who holds each claim. If a credited, identify what type of claim it is. Do not list claim have more than three nonpriority unsecured cl	aims already included in Part 1. If more
				Total claim
4.1 Ath	letico Physical Therapy	Last 4 digits of acc	count number	\$710.44
Non	oriority Creditor's Name			<u>.</u>
	Enterprise Drive Brook, IL 60523	When was the deb	of incurred?	
	ber Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply	
Who	incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	at least one of the debtors and anoth	•	RITY unsecured claim:	
	Check if this claim is for a commu	По		
debt			ing out of a separation agreement or divorce th	at you did not
ls th	e claim subject to offset?	report as priority cla		
I	No.	·	n or profit-sharing plans, and other similar debt	s
ΠY	'es	Other, Specify	Medical Bills	

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Debtor	72 Tammy L. Carlson	Case number (if know)			
4.2	CanopyMD	Last 4 digits of account number	\$141.59		
	Nonpriority Creditor's Name 7402 East Riverside Boulevard	When was the debt incurred?	ψσ		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one. ☐ Debtor 1 only				
		Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Medical Bills			
4.3	CEPAmerica Illinois LLP Nonpriority Creditor's Name	Last 4 digits of account number	\$16.29		
	PO Box 582663 Modesto, CA 95358-0046	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Medical Bills			
4.4	Chase Bank USA	Last 4 digits of account number	\$917.00		
	Nonpriority Creditor's Name		<u> </u>		
	Attn: Bankruptcy Dept. PO Box 15298 Wilmington, DE 19850	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Credit Card Purchases			

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	72 Tammy L. Carlson	Case number (if know)	
4.5	Chase Bank USA	Last 4 digits of account number	\$7,541.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 15298	When was the debt incurred?	4.7,0 11100
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card Purchases	
4.6	Lake Carol Home Owner's Association	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 3-200 Association Dr. Lanark, IL 61046	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify HOA Fees	
4.7	Members Alliance Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	\$6,017.00
	2550 South Alpine Road Rockford, IL 61108	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card Purchases	

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Debto	72 Tammy L. Carlson	Case number (if know)	
4.8	Ortholllinois	Last 4 digits of account number	\$7.82
	Nonpriority Creditor's Name Box 78620	When was the debt incurred?	
	Milwaukee, WI 53278-8620	When was the dest incurred:	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.9	OSF St. Anthony Med Center	Last 4 digits of account number	\$1,103.00
	Nonpriority Creditor's Name		V 1,100.00
	Attn: Bankruptcy Dept.	When was the debt incurred?	
	5510 East State St.		
	Rockford, IL 61108-2381 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or and date you may and date in one of one or an anax approp	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	<u> </u>	
	_	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.1			
0	Pay Pal	Last 4 digits of account number	\$2,039.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 45950	When was the debt incurred?	
	Omaha, NE 68145		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Debt Owed	

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Debt Debt	or 1 Gregory A. Carlson Tammy L. Carlson	Case number (if know)	
4.1 1	Perry Tunenberg DDS	Last 4 digits of account number	\$248.60
	Nonpriority Creditor's Name 4040 Morsay Drive Rockford, IL 61107	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.1	Physicians Immediate Care	Last 4 digits of account number	\$115.19
	Nonpriority Creditor's Name PO Box 8798 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.1 3	Rockford Gastroenterology Associate	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 401 Roxbury Rd. Rockford, IL 61107-6075	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bills	

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Debtor Debtor	Gregory A. Carlson Tammy L. Carlson	Case number (if know)	
4.1	Rockford Health Physicians	Last 4 digits of account number	\$162.91
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 2300 N Rockton Ave. Rockford, IL 61103	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.1 5	Rockford Orthopedic Associates	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 324 Roxbury Road Rockford, IL 61107	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bils	
4.1	Rockford Radiology		\$96.51
6	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ30.31
	Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	

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Debtor 2 Tammy L. Carlson Case number (if know) 4.1 **US Bank** \$6,584.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **PO Box 108** Saint Louis, MO 63166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community deht ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.1 World's Foremost Bank \$2,491.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 4800 NW 1st When was the debt incurred? Suite 300 Lincoln, NE 68521 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Afni Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 3097 Bloomington, IL 61702-3097 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Rockford Mercantile Agency** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 2502 S Alpine Rd Rockford, IL 61108 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Rockford Mercantile Agency** Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 2502 S Alpine Rd Rockford, IL 61108 Last 4 digits of account number

Debtor 1 Gregory A. Carlson

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Debtor 1 Gregory A. Carlson Debtor 2 Tammy L. Carlson		Case number (if know)		
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?		
Stanislaus Credit Control Services,	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims		
914 14th Street		■ Part 2: Creditors with Nonpriority Unsecured Claims		
P.O. Box 480		— 1 art 2. Groundlo Will Homphority Griddourou Glaimo		
Modesto CA 95353				

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising sut of a consention arrespond or diverse that			
IIOIII Fait 2	og.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	29,191.35
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	29,191.35

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		Docume	IIL Paue 29 01 54	
Fill in this infor	mation to identify your	case:		
Debtor 1	Gregory A. Carls	on		
	First Name	Middle Name	Last Name	
Debtor 2	Tammy L. Carlso	n		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u></u>
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3			<u> </u>	2 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	/				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	

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		Docum	ent Page 30 c	<u>f 54</u>	
Fill in this	information to identify yo	our case:			
Debtor 1	Gregory A. Car	rlson			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	Tammy L. Carl	Middle Name	Last Name		
	0,				
United Sta	tes Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS		
Case numl	ber				
(if known)					Check if this is an
				a	mended filing
Officia	l Form 106H				
	lule H: Your Co	dehtors			12/15
Jenea	idle II. Toul Co	uebloi 3			12/13
our name	and case number (if know	vn). Answer every question	on.	o this page. On the top of any Addass a codebtor.	
=					
■ No □ Yes					
□ res	i				
	hin the last 8 years, have y a, California, Idaho, Louisia			y? (Community property states and ngton, and Wisconsin.)	territories include
■ No.	Go to line 3.				
☐ Yes	s. Did your spouse, former s	pouse, or legal equivalent l	ive with you at the time?		
in line Form	2 again as a codebtor on	ly if that person is a guara	antor or cosigner. Make	if your spouse is filing with you. I sure you have listed the creditor of 6G). Use Schedule D, Schedule E/	on Schedule D (Official
	Column 1: Your codebtor			Column 2: The creditor to who	om you owe the debt
1	Name, Number, Street, City, State ar	nd ZIP Code		Check all schedules that apply:	·
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	_
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, line	_
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

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Deb	otor 1	Gregory A.	Carlson				
	otor 2	Tammy L. C	arlson				
Uni	ted States Bankrupto	cy Court for the	: NORTHERN DISTRIC	CT OF ILI	LINOIS		
(If kn	se number se number fficial Form	1061		-		Check if this is: An amended filing A supplement showing postrest in the following postrest in	
						MM / DD/ YYYY	
	chedule I: Y						12/
supp spor attac	use. If you are sepa ch a separate sheet	mation. If you rated and you	are married and not filing w	ith you, d	do not include informa	ving with you, include information ion about your spouse. If more sp d case number (if known). Answei	ace is needed
sup spo atta	plying correct infor use. If you are sepa ch a separate sheet	mation. If you rated and you to this form.	are married and not filing w	ith you, d	do not include informa ges, write your name ar	ion about your spouse. If more sp	ace is needed every question
supp spor attac Par	plying correct inforuse. If you are sepach a separate sheet t1: Describe Fill in your emplo	mation. If you rated and you to this form. Employment yment	are married and not filing wing the top of any additions the top of any additions.	Debto	do not include informa ges, write your name ar	ion about your spouse. If more sp d case number (if known). Answei	ace is needed every question
supp spor attac Par	plying correct inforuse. If you are sepach a separate sheet 11: Describe Fill in your emploinformation.	mation. If you rated and you to this form. Employment yment an one job, bage with	are married and not filing w	Debto	do not include informa ges, write your name ar	tion about your spouse. If more spid case number (if known). Answer	ace is needed every question
supp spor attac Par	plying correct inforuse. If you are separate sheet t1: Describe Fill in your emploinformation. If you have more thattach a separate p	mation. If you rated and you to this form. Employment yment an one job, bage with	are married and not filing wing the top of any additions the top of any additions.	Debto	do not include informa ges, write your name ar or 1 aployed t employed	Debtor 2 or non-filing sp	ace is needed every question
supp spor attac Par	plying correct inforuse. If you are separate sheet t1: Describe Fill in your emploinformation. If you have more thattach a separate pinformation about a	mation. If you rated and you to this form. Employment yment and one job, bage with additional seasonal, or	are married and not filing work on the top of any addition the top of any additional top of additional top of a top	Debto Em Not	do not include informa ges, write your name ar or 1 aployed t employed	Debtor 2 or non-filing sp Employed	ace is needed every question
supp spor attac Par	plying correct inforuse. If you are separate sheet t1: Describe Fill in your emploinformation. If you have more thattach a separate pinformation about a employers. Include part-time, s	mation. If you rated and you to this form. Employment man one job, page with additional seasonal, or c. clude student	are married and not filing work on the top of any addition the top of additional the	Debto Em Not Laboi Mulle	do not include informa ges, write your name ar r 1 aployed t employed	Debtor 2 or non-filing sp Employed Not employed CNA	oce is needed revery question oouse
supp spor attac	plying correct inforuse. If you are separate sheet t1: Describe Fill in your emplorinformation. If you have more thattach a separate pinformation about a employers. Include part-time, self-employed work Occupation may in	mation. If you rated and you to this form. Employment man one job, page with additional seasonal, or c. clude student	are married and not filing work on the top of any addition to the top of any additional top of a	Debto Em Not Laboi Mulle	do not include informa ges, write your name ar or 1 aployed t employed rer er Pinehurst Dairy	Debtor 2 or non-filing sp Employed CNA River Bluff Nursing H	oce is needed.
supj spor attac Par 1.	plying correct inforuse. If you are separate sheet t1: Describe Fill in your emploinformation. If you have more thattach a separate pinformation about a employers. Include part-time, self-employed work Occupation may in or homemaker, if it	mation. If you rated and you to this form. Employment man one job, page with additional seasonal, or c. clude student	are married and not filing work on the top of any addition to the top of any addition the top of any addition to the top of any addition to the top of any additional top of add	Debto Em Not Laboi Mulle	do not include informa ges, write your name ar ar 1 aployed t employed rer er Pinehurst Dairy 1 Ogilby Road ford, IL 61102	Debtor 2 or non-filing sp Employed CNA River Bluff Nursing H 4401 North Main Streen	oce is needed revery question couse

more space, attach a separate sheet to this form.

382.60

382.60

0.00

For Debtor 2 or non-filing spouse For Debtor 1 List monthly gross wages, salary, and commissions (before all payroll 1,346.58 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ Calculate gross Income. Add line 2 + line 3. 1,346.58 \$

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	otor 1 otor 2	Gregory A. Carlson Tammy L. Carlson	_		Case	number (if known)				
	0	line 4 hone	4			Debtor 1		or Debtor on-filing s	pouse	
	Cop	by line 4 here	4.		\$_	1,346.58	Ф		382.60	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	395.34	\$		49.00	
	5b.	Mandatory contributions for retirement plans	5k		\$_	0.00	\$		0.00	-
	5c.	Voluntary contributions for retirement plans	50	c.	\$	0.00	\$		0.00	=
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	\$		0.00	-
	5e.	Insurance	56	e.	\$	5.00	\$		0.00	-
	5f.	Domestic support obligations	5f	f.	\$	0.00	\$		0.00	_
	5g.	Union dues	50	g.	\$	0.00	\$		0.00	_
	5h.	Other deductions. Specify:	5ł	h.+	\$_	0.00	+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	400.34	\$		49.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	946.24	\$		333.60	_
8.	List 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0.		c		•			
	OL	monthly net income.	88		\$_	0.00	\$		0.00	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8t t 80		\$_ \$	0.00	\$		0.00	-
	8d.	Unemployment compensation	80		\$ -	0.00	\$		0.00	-
	8e.	Social Security	86		\$ -	0.00	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income		f.	\$_ \$_	0.00	\$		0.00	-
	8h.	Other monthly income. Specify:		h.+	\$	0.00	+\$		0.00	_
9.	Ado	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	0.00	\$		0.00	0
10	Cal	culate monthly income. Add line 7 + line 9.	10.	¢		946.24 + \$		333.60		1,279.84
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.			940.24 · ⁴		333.00		1,273.04
11.	State Included the	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you are friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r dep				•	n <i>Schedule</i>	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies							\$	1,279.84
13.	Do :	you expect an increase or decrease within the year after you file this forn No.	າ?					·	Combir monthly	ned y income
		Yes. Explain:								

Official Form 106I Schedule I: Your Income page 2

Fill in this infor	rmation to identify your case:				
			<u>.</u>		
Debtor 1	Gregory A. Carlson			if this is: an amended filing	
Debtor 2 (Spouse, if filing	Tammy L. Carlson			supplement show	ving postpetition chapter the following date:
United States Ba	ankruptcy Court for the: NORTHERN DISTRICT OF ILLIN	IOIS	N	MM / DD / YYYY	
Case number (If known)					
Official F	Form 106J				
Schedu	le J: Your Expenses				12/1
Be as comple information. I	ete and accurate as possible. If two married people ar f more space is needed, attach another sheet to this own). Answer every question.				
	scribe Your Household joint case?				
	o to line 2.				
■ Yes. [Ooes Debtor 2 live in a separate household?				
	■ No I Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	s for Separate Househ	old of Debto	or 2.	
2. Do you h	nave dependents?				
Do not lis Debtor 2.	t Debtor 1 and Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
Do not st	ate the				□ No
depende	nts names.	Son		9	Yes
		Son		10	□ No ■ Yes
					□ No
		Son		17	■ Yes
					□ No
expense	expenses include s of people other than and your dependents?				☐ Yes
Estimate you	timate Your Ongoing Monthly Expenses r expenses as of your bankruptcy filing date unless y of a date after the bankruptcy is filed. If this is a supp te.				
	nses paid for with non-cash government assistance in uch assistance and have included it on <i>Schedule I:</i> 10 106I.)			Your expe	enses
	al or home ownership expenses for your residence. It is and any rent for the ground or lot.	nclude first mortgage	4. \$		1,300.00
If not inc	luded in line 4:				
4a. Re	al estate taxes		4a. \$		583.33
4b. Pro	operty, homeowner's, or renter's insurance		4b. \$		60.00
	me maintenance, repair, and upkeep expenses meowner's association or condominium dues		4c. \$ 4d. \$		50.00 0.00
- u. 110	moowner a association of contactifficial auca		- α. φ		0.00

0.00

5. Additional mortgage payments for your residence, such as home equity loans

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Debto	or 1 Gre	egory	A. Carlson			
Debto	or 2 <u>Tan</u>	mmy L	Carlson	Case num	nber (if known)	
6. I	4! !4!aa.					
	Utilities: 6a. Elec	ctricity	heat, natural gas	6a.	\$	300.00
			ver, garbage collection	6b.		175.00
			, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	310.00
		er. Spe		6d.	·	0.00
			ekeeping supplies		·	600.00
			hildren's education costs	8.	· ·	85.00
			ry, and dry cleaning	9.	· <u> </u>	200.00
	•		roducts and services	10.		50.00
			ntal expenses	10.	· · · · · · · · · · · · · · · · · · ·	
			Include gas, maintenance, bus or train fare.	11.	Φ	100.00
			ar payments.	12.	\$	440.00
			clubs, recreation, newspapers, magazines, and books	13.	·	50.00
			ributions and religious donations	14.	· ———	0.00
	Insurance		ibutions and rengious donations	17.	Ψ	0.00
-			surance deducted from your pay or included in lines 4 or 20.			
	15a. Life			15a.	\$	0.00
	15b. Hea			15b.	·	0.00
	15c. Veh			15c.		300.00
			rance. Specify:	15d.	·	0.00
			clude taxes deducted from your pay or included in lines 4 or 2			0.00
	Specify:	J 110t 111	clude taxes deducted from your pay of included in lines 4 of 2	16.	\$	0.00
			ease payments:	4-7	•	
			ents for Vehicle 1	17a.	·	99.00
		. ,	ents for Vehicle 2	17b.	·	0.00
	17c. Othe			17c.	· -	0.00
	17d. Othe		•	17d.	\$	0.00
			of alimony, maintenance, and support that you did not re		•	0.00
			your pay on line 5, Schedule I, Your Income (Official Form	106I). 18.		
		yments	you make to support others who do not live with you.		\$	0.00
	Specify:			19.		
			erty expenses not included in lines 4 or 5 of this form or o			0.00
			on other property	20a.	·	0.00
	20b. Rea			20b.	·	0.00
			nomeowner's, or renter's insurance	20c.	·	0.00
			ce, repair, and upkeep expenses	20d.	· -	0.00
- 2	20e. Hom	neowne	er's association or condominium dues	20e.	\$	0.00
1. (Other: Spe	ecify:	Birthdays/Holidays/Haircuts	21.	+\$	65.00
2. (Calculate	your n	monthly expenses			
			through 21.		\$	4,767.33
:	22b. Copy	/ line 22	2 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2	\$	
:	22c. Add li	line 22a	a and 22b. The result is your monthly expenses.		\$	4,767.33
2 /	Calculata	. VOUE E	nonthly not income			,
			nonthly net income. 12 (your combined monthly income) from Schedule I.	23a.	¢	4 922 47
			monthly expenses from line 22c above.	23a. 23b.		4,823.17
•	230. Cop	by your	monthly expenses from line 22c above.	230.	-\$	4,767.33
:			our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	55.84
4 I	Do vou or	vnact c	In increase or decrease in your expenses within the year	after vou file this	s form?	•
- 1	For example	e, do yo	u expect to finish paying for your car loan within the year or do you expert so fyour mortgage?			e or decrease because of a
	■ No.					
	□ Yes.	1	Explain here:			
- 1	- 162.		Explain note.			

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Fill in this infor	mation to identify your	rase.				
Debtor 1						
Debior i	Gregory A. Carls	Middle Name Last Name				
Debtor 2	Tammy L. Carlso					
(Spouse if, filing)	First Name	Middle Name Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS				
Case number						
(if known)			☐ Check if this is an amended filing			
two married po ou must file thi btaining mone ears, or both. 1	eople are filing together is form whenever you find yor property by fraud in 8 U.S.C. §§ 152, 1341, 1	n Individual Debtor's Schedules t, both are equally responsible for supplying correct information the bankruptcy schedules or amended schedules. Making a false the connection with a bankruptcy case can result in fines up to \$25 519, and 3571.	statement, concealing property, or			
Sig	n Below					
Did you pa	ay or agree to pay some	one who is NOT an attorney to help you fill out bankruptcy forms	s?			
■ No						
☐ Yes. I	Yes. Name of person Attach Bankruptcy Petition Preparer Declaration, and Signature (Official I					
	alty of perjury, I declare re true and correct.	that I have read the summary and schedules filed with this decla	aration and			
X /s/ Gre	egory A. Carlson	X <u>/s/</u> Tammy L. Carlson				
	ry A. Carlson are of Debtor 1	Tammy L. Carlson Signature of Debtor 2				
Date ,	June 9, 2017	Date June 9, 2017				

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Fill	in this inforn	nation to identify your	case:							
Deb	otor 1	Gregory A. Carls								
		First Name	Middle Name	Last Name						
	otor 2 use if, filing)	Tammy L. Carlso	Middle Name	Last Name						
, ,										
Uni	ted States Bai	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS						
	se number own)					theck if this is an mended filing				
	ficial Fo		Affairs for Individ	duals Filing for B	ankruptcy	4/16				
info num	rmation. If m	ore space is needed, n). Answer every ques	attach a separate sheet to tion.	this form. On the top of any	equally responsible for sup					
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before						
1.	What is you	current marital statu	s?							
	■ Married□ Not mar	ried								
2.	During the la	ast 3 vears, have you	ived anywhere other than	where you live now?						
	 During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. 									
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. state					ity property state or territory co, Texas, Washington and W					
	■ No									
	_	ke sure you fill out Sch	edule H: Your Codebtors (O	fficial Form 106H).						
		•	,	,						
Par	t 2 Explai	n the Sources of You	Income							
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.									
	□ No									
	_	in the details.								
			Dobtor 1		Debter 2					
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income				
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$30,613.69	■ Wages, commissions, bonuses, tips	\$3,299.34				
			☐ Operating a business		☐ Operating a business					

Official Form 107

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		mmy L. Carlso		Case number (if known)			
			Dahtan 4		Dahtan 0		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
	or last calen anuary 1 to	dar year: December 31, 20	Wages, commission bonuses, tips	\$65,000.00	■ Wages, commissions, bonuses, tips	\$31,000.00	
			☐ Operating a busine	ess	☐ Operating a business		
		dar year before t December 31, 20		sns, \$65,000.00	■ Wages, commissions, bonuses, tips	\$55,000.00	
			☐ Operating a busine	ess	☐ Operating a business		
	□ No	source and the gro	oss income from each source se	eparately. Do not include income	that you listed in line 4.		
	■ Yes.	Fill in the details.					
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)	
	or last calen anuary 1 to	dar year: December 31, 20	Capital Losses	\$-3,000.00	Unemployment	\$12,516.00	
Pa	•	Debtor 1's or Debtor individual primar During the 90 da	rily for a personal, family, or hou ays before you filed for bankrupt to line 7. below each creditor to whom you dethat creditor. Do not include pa include payments to an attorney justment on 4/01/19 and every 3	sumer debts? consumer debts. Consumer deb usehold purpose." tcy, did you pay any creditor a tota ou paid a total of \$6,425* or more ayments for domestic support obli y for this bankruptcy case. B years after that for cases filed or	al of \$6,425* or more? in one or more payments and gations, such as child support or after the date of adjustmen	the total amount you and alimony. Also, do	
		Yes List include	,	ou paid a total of \$600 or more an port obligations, such as child sup	, ,		

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Debtor 1 Gregory A. Carlson Debtor 2 Tammy L. Carlson Case number (if known) Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... still owe paid Nationstar Mortgage LLC 2/2017 - 4/2017 \$3,646.00 \$217,393.00 Mortgage 8950 Cypress Waters Blvd. ☐ Car Coppell, TX 75019 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other **Members Alliance Credit Union** 2/2017 - 4/2017 \$861.00 \$9,362.00 ■ Mortgage 2550 South Alpine Road ■ Car Rockford, IL 61108 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address **Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property

8.

Explain what happened

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No

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 4/5/2017 001DebtorCC \$14.95 \$14.95 378 Summit Ave.

Jersey City, NJ 07306 www.debtorcc.org

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Debtor 1 Gregory A. Carlson
Debtor 2 Tammy L. Carlson

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104	\$600.00		4	1/2017	\$600.00		
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.							
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and v transferred	alue of any property	c	Date payment or transfer was made	Amount of payment		
18.	 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do n include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 							
	Person Who Received Transfer Address Person's relationship to you	Description and v	red pa	Describe any property or payments received or debts paid in exchange		Date transfer was made		
	Lake Carol Home Owner's Association 3-200 Association Dr. Lanark, IL 61046	Lot at Section 1		roperty wa OA defaul	as taken via It	3/2017		
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.							
	Name of trust	Description and v	alue of the property t	ransferred		Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Instr	uments. Safe Deposit	Boxes, and Storage	Units				
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage								
	houses, pension funds, cooperatives, associa No Yes. Fill in the details.			posit, Sildi	ss III Daliks, Cledit	umons, brokerage		
		ast 4 digits of ccount number	Type of account or instrument	close move	account was d, sold, d, or ferred	Last balance before closing or transfer		

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Debtor 1 Gregory A. Carlson
Debtor 2 Tammy L. Carlson

Case number (if known)

21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or pla	ace other than your home within 1	year before you filed for bankruptcy	?			
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control for S	Someone Else					
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any propert	y you borrowed from, are storing for	, or hold in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10: Give Details About Environmental Informa	ation					
or t	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground	- •				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	aw, whether you now own, operate, o	or utilize it or used			
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	substance,			
Rер	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			

Case 17-81393 Doc 1 Filed 06/09/17 Entered 06/09/17 15:52:03 Desc Main Document Page 42 of 54 Debtor 1 Gregory A. Carlson Debtor 2 Tammy L. Carlson Case number (if known) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. **Address** (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tammy L. Carlson /s/ Gregory A. Carlson **Gregory A. Carlson** Tammy L. Carlson Signature of Debtor 1 Signature of Debtor 2 Date June 9, 2017 **Date** June 9, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform						
Debtor 1	Debtor 1 Gregory A. Carlson					
	First Name	Middle Name	Last Name			
Debtor 2	Tammy L. Carlson	n				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOI			OF ILLINOIS			
Case number				☐ Check if this is an amended filing		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's Members Alliance Credit Union name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No	
Description of property securing debt: 2004 Jaguar X-Type 107,000 miles	■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ Yes	
Creditor's Members Alliance Credit Union	■ Surrender the property.	■ No	
name: Description of property securing debt: 2008 Buick Enclave 150,000 miles	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes	
Creditor's Nationstar Mortgage LLC name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No	
Description of property 907 Greenlee Avenue Winnebago, IL 61088 Winnebago County	 ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Gregory A. Carlson Tammy L. Carlson	Case number (if known)	
securing debt:		
Part 2: List Your Unexpired Personal Property Leases or any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Unexou may assume an unexpired personal property lease if the	chedule G: Executory Contracts and Unexpired Leases (Off red leases are leases that are still in effect; the lease period rustee does not assume it. 11 U.S.C. § 365(p)(2).	cial Form 106G), fill has not yet ended.
Describe your unexpired personal property leases	Will the lease	e be assumed?
Lessor's name: Description of leased Property:	□ No	
Lessor's name: Description of leased Property:	□ No	
Lessor's name: Description of leased Property:	☐ Yes ☐ No ☐ Yes	
Lessor's name: Description of leased Property:	□ No	
Lessor's name: Description of leased Property:	□ No	
Lessor's name: Description of leased Property:	□ No	
Lessor's name: Description of leased Property:	□ No	
Part 3: Sign Below		
Inder penalty of perjury, I declare that I have indicated my i roperty that is subject to an unexpired lease.	ention about any property of my estate that secures a debt a	na any personal
/ /s/ Gregory A. Carlson	X /s/ Tammy L. Carlson	
Gregory A. Carlson Signature of Debtor 1	Tammy L. Carlson Signature of Debtor 2	

Date

Date

June 9, 2017

June 9, 2017

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	5	filing fee	•
\$7	5	administrative fee	
+ \$1	5	trustee surcharge	
\$33	5	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81393 Doc 1 Filed 06/09/17 Entered 06/09/17 15:52:03 Desc Main Document Page 49 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In #0	Gregory A. Carlson		Case No.	
In re	Tammy L. Carlson	Debtor(s)	Chapter	7
			_	
	DISCLOSURE OF COM	PENSATION OF ATTOI	RNEY FOR DE	EBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the rendered on behalf of the debtor(s) in contempla	e filing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	600.00
	Prior to the filing of this statement I have received	ved	\$	600.00
	Balance Due		\$	0.00
. Т	The source of the compensation paid to me was:			
	\blacksquare Debtor \square Other (specify):			
. Т	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
. I	■ I have not agreed to share the above-disclosed	compensation with any other person	unless they are memb	bers and associates of my law firm.
[☐ I have agreed to share the above-disclosed comcopy of the agreement, together with a list of the			
. І	In return for the above-disclosed fee, I have agreed	to render legal service for all aspect	s of the bankruptcy c	ase, including:
b c	a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, schedules c. Representation of the debtor at the meeting of c d. [Other provisions as needed] Negotiations with secured creditors reading the provision agreements and applie	, statement of affairs and plan which reditors and confirmation hearing, and to reduce to market value; executions as needed; preparation	may be required; and any adjourned hear emption planning;	rings thereof;
i. E	522(f)(2)(A) for avoidance of liens of By agreement with the debtor(s), the above-discloss Representation of the debtors in an any other adversary proceeding.	ed fee does not include the following		es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement ankruptcy proceeding.	of any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Jı	une 9, 2017	/s/ Daniel A. Spri	nger	
	ate	Daniel A. Springe Signature of Attorne Springer Law Fir 2222 E State St Suite 107 Rockford, IL 6110	er y m	
		815.312.4725		
		dspringerlaw@gi Name of law firm	nan.com	

Springer Law Firm

2222 East State St. # A-104A, Rockford, IL

815.312.4275

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$600. This is a flat fee arrangement, and does not
 include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
 Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
 information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold.

 Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement.
- 7. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 8. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.

9. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 4-17-17

Signature:

Drint Mamas

Sionature:

Print Name: 1

Attorney Signature:

Attorney Print?

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United States Bankruptcy Court Northern District of Illinois

In re	Gregory A. Carlson Tammy L. Carlson		Case No.	
		Debtor(s)	Chapter 7	
	VERIFICA	ATION OF CREDITOR MA	TRIX	
		Number of Ci	reditors:	21
	The above-named Debtor(s) hereby (our) knowledge.	verifies that the list of creditor	s is true and correct to	the best of my
Date:	June 9, 2017	/s/ Gregory A. Carlson		
		Gregory A. Carlson Signature of Debtor		
Date:	June 9, 2017	/s/ Tammy L. Carlson		
		Tammy L. Carlson Signature of Debtor		

Afni Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097

Athletico Physical Therapy 625 Enterprise Drive Oak Brook, IL 60523

CanopyMD 7402 East Riverside Boulevard Loves Park, IL 61111

CEPAmerica Illinois LLP PO Box 582663 Modesto, CA 95358-0046

Chase Bank USA Attn: Bankruptcy Dept. PO Box 15298 Wilmington, DE 19850

Lake Carol Home Owner's Association 3-200 Association Dr. Lanark, IL 61046

Members Alliance Credit Union 2550 South Alpine Road Rockford, IL 61108

Nationstar Mortgage LLC 8950 Cypress Waters Blvd. Coppell, TX 75019

OrthoIllinois Box 78620 Milwaukee, WI 53278-8620

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381 Pay Pal Attn: Bankruptcy Dept. PO Box 45950 Omaha, NE 68145

Perry Tunenberg DDS 4040 Morsay Drive Rockford, IL 61107

Physicians Immediate Care PO Box 8798 Carol Stream, IL 60197

Rockford Gastroenterology Associate Attn: Bankruptcy Dept. 401 Roxbury Rd. Rockford, IL 61107-6075

Rockford Health Physicians Attn: Bankruptcy Dept. 2300 N Rockton Ave. Rockford, IL 61103

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Rockford Orthopedic Associates 324 Roxbury Road Rockford, IL 61107

Rockford Radiology Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Stanislaus Credit Control Services, 914 14th Street P.O. Box 480 Modesto, CA 95353

US Bank PO Box 108 Saint Louis, MO 63166 World's Foremost Bank 4800 NW 1st Suite 300 Lincoln, NE 68521